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CONFIRMATION NO. 3336

<b>SERIAL NUMBER</b> 10/771,804	<b>FILING OR 371(c) DATE</b> 02/04/2004 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3761	<b>ATTORNEY DOCKET NO.</b> CARDE.63292
<b>APPLICANTS</b> Wilfred J. Samson, Saratoga, CA; Hoa Nguyen, San Jose, CA; Huu Nguyen, San Jose, CA; Brady Esch, San Jose, CA; Janine Robinson, Half Moon Bay, CA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/102,124 03/19/2002 ABN				
<b>** FOREIGN APPLICATIONS *****</b> (none) AMM				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 05/05/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 26
Examiner's Signature <i>Adam Maratich</i> Initials <i>AMM</i>		<b>INDEPENDENT CLAIMS</b> 4		
<b>ADDRESS</b> 27629				
<b>TITLE</b> Method and apparatus for treating acute myocardial infarction with hypothermic perfusion				
<b>FILING FEE RECEIVED</b> 482	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	